(0 6 0) Co	verage and Performance Report			FCC Form 690 Ap proved by OMB OMB Control No. 3060-1185 Page 3 of 8
<010>	Study Area Code		238045	
<015>	Study Area Name		Carolina West Wireless, Inc.	2002-99
<020>	Program Year	10-1-1	2014	
<030>			Todd Slamowitz	
<035>			7035848678 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030> tslamowitz@fcclaw.com		tslamowitz@fcclaw.com	
<140>	Coverage and Performance Report Year 01/2013 - 12/		on Status.zip	
		Name of Attac	hed Document (.zip)	-
	Drive Test Results attachments	Name of Attac	ned Document (.zip)	
	Scattered Site Test Results attachments	Name of Attac	hed Document (.zip)	

<141> <a2> <b1> <b2> <b3> <c1> <c2> <c3> <d>> Certify Certify that that Drive Total Electron Test Road Road ic Result Miles per Miles Shapefil s are Certify that Road Resident **Total Resident** Miles Census covered es are upload Scattered Resident Block Population Population Site Tests are per per uploade ed Population per Newly Reached Reached by Census Newly Census uploaded (yes/n Census Block Census Block State County by Service Service Block Reached Block (yes/no) (yes/no) o) -- \$ee attached worksheet

Percentage of Total
Population Reached by
Service
Percentage of Total
Road Miles covered
by Service

(070) Urban Rate Comparability Certification Compliance	FCC Form 690
	Approved by OMB
	OMB Control No. 3060-1185
	Page 4 of 8

<010>	Study Area Code	238045
<015>	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING CERTIFICATION DATA ON ITS OWN BEHALF:

Certification of Officer of	or Employee as to Compliance with 47 CFR §54.1009(a)(4)
I certify that I am an officer or employee of the reporting carrier; my r form and in any attachments is accurate.	responsibilities include ensuring compliance with 47 CFR §54.1009(a)(4), the information reported on this
Name of Reporting Carrier:	
Signature of Authorized Officer:	Date
Printed name of Authorized Officer:	
Title or position of Authorized Officer:	
Telephone number of Authorized Officer:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING CERTIFICATION DATA ON THE CARRIER'S BEHALF:

certify that (Name of Agent)Todd_Slamowitz arrier. I also certify that I am an officer or employee of the reporting carri uthorized agent; and, to the best of my knowledge, the reports and data p	is authorized to submit the information reported on behalf of the reporting ier; my responsibilities include ensuring compliance with 47 CFR §54.1009(a)(4) reported to the provided to the authorized agent is accurate.
ame of Authorized Agent: Todd Slamowitz	
ame of Reporting Carrier: Carolina West Wireless,	Inc.
ignature of Authorized Officer or Employee: CERTIFIED ONLINE	Date: 07/16/2014
rinted name of Authorized Officer or Employee: Lisa Mabe	
itle or position of Authorized Officer or Employee: Staff Accountant	
elephone number of Authorized Officer or Employee: 3369735000 ext.10	003
tudy Area Code of Reporting Carrier: 238045	Filing Due Date for this form: 07/31/2014

Certification of Agent Authoriz	ed to File Compliance with 47 C	R §54.1009(a)	(4) on Behalf of F	leporting Carrier
l, as agent for the reporting carrier, certify that I am authori data provided by the reporting carrier; and, to the best of n				ovided the data reported herein based o
Name of Reporting Carrier:	Carolina West Wireless, Inc.			
Name of Authorized Agent or Employee of Agent:	Todd Slamowitz			
Signature of Authorized Agent or Employee of Agent:	CERTIFIED ONLINE			Date: 07/16/2014
Printed name of Authorized Agent or Employee of Agent:	Todd Slamowitz			
Title or position of Authorized Agent or Employee of Agent	FCC Legal Counsel			
Telephone number of Authorized Agent or Employee of Ager	t: 7035848678 ext.			-240
Study Area Code of Reporting Carrier: 238045	Filing Due Dat	e for this form:	07/31/2014	

To the second second		Section of the sectio		
(080) Triba	I Lands Reporting			FCC Form 690 Approved by OMB
3.07				OMB Control No. 3060-1185
				Page 5 of 8
No. 12 and 10 an			Not be stored to	
<010>	Study Area Code		238045	
<015>	Study Area Name Program Year		Carolina West Wireless, 2014	Inc.
<030>	Contact Name - Person USAC should contact regarding th	nis data	Todd Slamowitz	
<035>	Contact Telephone Number - Number of person identifie			
<039>	Contact Email Address - Email Address of person identifie	ed in data line <0	30> tslamowitz@fcclaw.com	
<142>	State			
(142)	State			
<143>	County			
<144>	Tribal Land(s) on which ETC Serves			
			The second secon	
<145>	Tribal Government Engagement Obligation			
		Name of Attached	Document (.pdf)	
	Kusus samanu samas Tribal lands alassa salast (Vas Nas	a NA) for		
	If your company serves Tribal lands, please select (Yes,No each of these boxes to confirm the status described on the			
	PDF, on line 145, demonstrates coordination with the Tr			
	government pursuant to § 54.1004 includes:			
			Select	
<146>	Needs assessment and deployment planning with a feet	s on Tribal	(Yes,No, NA)	
12402	Needs assessment and deployment planning with a focu- community anchor institutions;	15 On Tribal		
<147>	Feasibility and sustainability planning;			
<148>	Marketing services in a culturally sensitive manner;			
<149>	Compliance with Rights of way processes			
<150>	Compliance with Land Use permitting requirements			
<151>	Compliance with Facilities Siting rules			
<152>	Compliance with Environmental Review processes			
<153>	Compliance with Cultural Preservation review processes			

<154> Compliance with Tribal Business and Licensing requirements.

(090) Project	Update Information	Approved by OMB
		OMB Control No. 3060-1185 Page 6 of 8
<010>	Study Area Code	
<015>	Study Area Code Study Area Name	238045
<020>	Program Year	Carolina West Wireless, Inc.
<030>	Contact Name - Person USAC should contact regarding this data	2014 Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	APPOSITION OF THE POSITION OF THE POSITION OF
		0540001202014000
<200>	Date Authorized to Receive Support	07/18/2013
<201>	Targeted Completion Date	02/05/2016
<202>	Total Mobility Fund Support Awarded	267050.0
<203>	Total Mobility Fund Support Disbursed	89016.67
<204>	Support Applied to Network Design	7974.79
<205>	Support Applied to Construction	2922.13
<206>	Support Applied to Deployment	
<207>	Support Applied to Maintenance	
<208>	Certify Network will Support 3G Mobile Service (Yes / No)	0 0
<209>	Certify Network will Support 4G Mobile Service (Yes / No)	O
<210>	Actual Completion Date	
<211>	Project Status Description (attached)	CWW_PSD_NC.pdf
	Please check these boxes below to confirm that the attached PDF, on line	{Name of PDF attached}
	211, contains a project status pursuant to §54.1005(b)(2)(v). The information	
	shall be submitted as appropriate.	
<212>	Status of Network Deployment - Network Design	
<213>	Status of Network Deployment - Construction	—

<214>

<215>

<216>

<217>

Status of Network Deployment - Deployment

Status of Network Deployment - Maintenance

Project Budget Status

Project Plan Status

[101] Certification - Reporting Carrier	FCC Form 690
	Approved by OMB
	OMB Control No. 3060-1185
The second of th	Page 7 of 8

<010>	Study Area Code	238045
<015>	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

I certify that I am an officer of the reporting carrier; my respondence of my knowledge, the information reported on this form	nsibilities include ensuring the accuracy of the annual reporting requirements for Mobility Fund recipients; and, to the annual reporting requirements for Mobility Fund recipients; and, to the annual reporting requirements is accurate.
Name of Reporting Carrier:	
Signature of Authorized Officer:	Date
Printed name of Authorized Officer:	
Title or position of Authorized Officer:	
Telephone number of Authorized Officer:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:

(102) Certification - Agent / Carrier	FCC Form 690
Control of the Contro	Approved by OMB
· 在一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个	OMB Control No. 3060-1185
[1] [1] [1] [1] [1] [1] [1] [1] [1] [1]	Page 8 of 8

<010>	Study Area Code	238045
<015>	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

certify that (Name of Agent) Todd Slamowitz also certify that I am an officer of the reporting carrier; my responsibilities agent; and, to the best of my knowledge, the reports and data provided to	is authorized to submit the information reported on behalf of the reporting carrier is include ensuring the accuracy of the annual data reporting requirements provided to the authorized to the authorized agent is accurate.
Name of Authorized Agent: Todd Slamowitz	
Name of Reporting Carrier: Carolina West Wireless, Inc.	
Signature of Authorized Officer: CERTIFIED ONLINE	Date: 07/16/2014
Printed name of Authorized Officer: Lisa Mabe	
Title or position of Authorized Officer: Staff Accountant	
Telephone number of Authorized Officer: 3369735000 ext.1003	
Study Area Code of Reporting Carrier: 238045	Filing Due Date for this form: 07/31/2014

Certification of Agent Authorized to File Annual Reports for Mobility Fund Recipients on Behalf of Reporting Carrier I, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for Mobility Fund recipients on behalf of the reporting carrier; I have provided the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reported herein is accurate.				
Name of Authorized Agent or Employee of Agent: Todd Slamowitz				
Signature of Authorized Agent or Employee of Agent: CERTIFIED ONLINE	Date: 07/16/2014			
Printed name of Authorized Agent or Employee of Agent: Todd Slamowitz				
Title or position of Authorized Agent or Employee of Agent FCC Legal Counsel				
Telephone number of Authorized Agent or Employee of Agent: 7035848678 ext.				
	07/31/2014			

Attachments

(DCS) Courses and Dada manage Based	- 600
(060) Coverage and Performance Report FCC Fort	1094
	J.L. OLID
Approve	d by OMB
OME	DOED 140F
CIVIB CO	ntrol No. 3060-1185

Study Area Code	238045
Study Area Name	Carolina West Wireless, Inc.
Program Year	2014
Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com
Coverage and Performance Report Year	01/2013 - 12/2013
	Study Area Name Program Year Contact Name - Person USAC should contact regarding this data Contact Telephone Number - Number of person identified in data line <030> Contact Email Address - Email Address of person identified in data line <030>

<82> <83> <61> <62> <62> <63> <64> <65< <65 <141> Certify that Certify that Certify that Resident Total Resident Road Miles Electronic Drive Test Scattered Site **Total Road** Population Population Reached by Road Miles per Census per Census Block Newly Miles Shapefiles are Results are Tests are Resident Population per **Newly Reached** covered per uploaded uploaded uploaded County Wilkes Census Block Census Block Service Block (yes/no) (yes/no) (yes/no) by Service Reached Census Block 0000 NC 0 0 0 0.0 0.0 0.0 Yes

> Percentage of Total Population Reached by Service

0

Percentage of Total Road Miles covered by Service

0

Caroline West Wireless, Inc.

Project Status Description

Pursuant to Section 54.1009(a)(6) of the Commission's rules, ¹ Carolina West Wireless, Inc. ("Filer") submits that there is no material updates to its project description, included the projected budget, associated with this Study Area Code that was provided by Filer in its FCC Form 680 filed in conjunction with its Auction 901 winning bids.

In its FCC Form 680, Filer explained that in order to provide the most advanced wireless broadband service available to date, Filer is using the proceeds from auction 901 to expand its footprint with new cell sites, and supplementing its existing network footprint with 4G service. Specifically, utilizing the 1900 MHz, 1700/2100 MHz spectrum bands, along with the 700 MHz spectrum band, Filer intends to provide high speed, broadband data services over 4G. Further, installation of new cell sites and the overlay of 4G will enable Filer to meet its public interest obligations to provide rural North Carolina citizens with access to advanced telecommunications and information technologies that are reasonably comparable to those available in urban areas.

As of this date Filer had completed its network design, and has commenced construction of its network. Filer anticipates that it will compete construction and deploy the network in the areas associated with this study code by no later than the construction deadline of July 19, 2016.

Section 54.1009(a)(6) provides that a winning bidder shall include "Updates to the information provided in § 54.1005(b)(2)(v).

FCC Form 690 - Construction Status

Carolina West Wireless, Inc. has not yet completed construction with respect to the SAC associated with this filing.

Date of the Control			
0.00	Fund §54.1009 Annual Reporting lection Form		FCC Form Approved by OMB OMB 3060-1185 Avg. Burden Estimate per Respondent: 18 Hours
<010>	Study Area Code	238046	
	Study Area Name	Carolina West Wireless, Inc.	ACCEPTED/FILED
<020>	Program Year	2014	JUL 23 2014
<030>	Contact Name: Person USAC should contact with questions about this data	Todd Slamowitz	Federal Communications Commission Office of the Secretary
<035>	Contact Telephone Number: Number of the person identified in data line <030>	7035848678 ext.	211199 51 2150 2001 2001
<039>	Contact Email: Email of the person identified in data line <030>	tslamowitz@fcclaw.com	
		X	
<040>	Has the information required pursuant to §54.1009 <041> Attach a description of the documents file		(check box when complete) (040>
	<042> Cite the Study Area Code (SAC) for the Fo	rm 481 reporting	<042>
	<043> Cite the date of the Form 481 reporting		<043>
<050>	Carrier Contact Information (has the contact info. cha	inged since prior filing? Yes or No)	0 0
		(If yes, complete the attached worksheet)	<050>
<060>	Coverage and Performance Report	(complete attached worksheet)	<060>
<070>	Urban Rate Comparability Certification	(complete attached certification)	<070> 🗸
<080>	Tribal Lands Reporting (y/n?) (Does this study area cov	er tribal lands? Yes or No)	\circ
		(If yes, complete the attached worksheet)	<080>
<090>	Project Update Information	(complete attached worksheet)	<090>
<100>	Certifications		
		lete attached certification)	<101>
	<102> Agent Certification (comp	lete attached certification)	<102>

Notice to Individuals Required by the Paperwork Reduction Act of 1995

OMB Control Number 3060-1185 (Annual Report for Mobility Fund Phase I Support, FCC Form 690 and Record Retention Requirements)

Notice to Individuals Required by the Paperwork Reduction Act of 1995

Public reporting burden for this collection of information is estimated to average 18 hours per response. Our estimate includes the time to read the instructions, look through existing records, gather and maintain required data, and actually complete and review the form or response. If you have any comments on this estimate, or on how we can improve the collection and reduce the burden it causes you, please write the Federal Communications Commission, Office of Managing Director, AMD-PERM, Washington, DC 20554, Paperwork Reduction Act Project (3060-1185). Please DO NOT SEND COMPLETED FORMS TO THIS ADDRESS. You are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number and/or we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060-1185.

THIS NOTICE IS REQUIRED BY THE PAPERWORK REDUCTION ACT OF 1995, PUBLIC LAW 104-13, OCTOBER 1, 1995, 44 U.S.C. SECTION 3507.

(050) Carr	ler Contact Form		FCC Form 690 Approved by OMB OMB Control No. 3060-1185 Page 2 of 8
<010>	Study Area Code	238046	
<015>	Study Area Name	Carolina West Wireless, Inc.	
<020>	Program Year	2014	
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz	
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com	
Reporting	Carrier / Mobility Fund Phase 1 Winning Bidder		
<110>	FCC Registration Number		
<111>	Filing Carrier Name		
	200 0.7%		
<112>	Winning Bidder Carrier Name		
<113>	Street Address (or PO Box)		
<114>	City	= 2001 (#1010)	
<115>	State		
<116>	Zip-Code		
<117>	Telephone Number		
<118>	Fax Number		
<119>	Email Address		
Contact In <120> <121> <122> <123> <124> <125> <126> <127> <128>	iformation if same as above, indicate in this box Name (First, MI, Last, Suffix) Filing Carrier Name Street Address (or PO Box) City State Zip-Code Telephone Number Fax Number Email Address		
Authorize	d Agent Information if no agent, indicate in this box		
<120>	Name (First, MI, Last, Suffix)	- 446 (N.)	
<121>	Company		
<122>	Street Address (or PO Box)	S-	24E-02300005-
<123>	City	3 4892	
<124>	State		
<125>	Zip-Code		TO DAY OF THE PART
<126>	Telephone Number	200 I	
<127>	Fax Number	5246 W. J. W.	
<128>	Email Address	151.88. (St. 1018) 1018(1) 1418(1)	

(060) Coverage and Performance Report	FCC Form 690
· 1000 x x 2000 x 2	Ap proved by OM8
	OMB Control No. 3060-1185
	Page 3 of 8

<010>	Study Area Code	238046
<015>	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com
<140>	Coverage and Performance Report Year 01/2013 - 12/2013	

	Construction Status.zip	\neg
Electronic Shapefiles attachments		
	Name of Attached Document (.zip)	_
Drive Test Results attachments		
	Name of Attached Document (.zip)	=
Scattered Site Test Results attachments		
	Name of Attached Document (.zip)	

Resident Population Population per State County Census Block Census Block Population Pop	Service	Road Miles per Census Block	Road Miles per Census Block Newly Reached	Total Road Miles covered per Census Block	Certify that Electron ic Shapefil es are uploade d (yes/no)	Result s are upload ed (yes/n	Certify that Scattered Site Tests ar uploaded (yes/no)
					1	-	
	ed works	heet					

٥		0
Percentage of Total	Percentage of Total	
Population Reached by	Road Miles covered	
Service	by Service	

(070) Urban Rate Comparability Certification Compliance	FCC Form 690
	Approved by OMB
	OMB Control No. 3060-1185
	Page 4 of 8

<010>	Study Area Code	238046
<015>	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING CERTIFICATION DATA ON ITS OWN BEHALF:

Certification of (Officer or Employee as to Compliance with 47 CFR §54.1009(a)(4)
I certify that I am an officer or employee of the reporting car form and in any attachments is accurate.	rier; my responsibilities include ensuring compliance with 47 CFR §54.1009(a)(4), the information reported on this
Name of Reporting Carrier:	
Signature of Authorized Officer:	Date
Printed name of Authorized Officer:	
Title or position of Authorized Officer:	
Telephone number of Authorized Officer:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:
Persons willfully making false statements on this form can l	e punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING CERTIFICATION DATA ON THE CARRIER'S BEHALF:

	Slamowitz er or employee of the reporting carrier; my respond my knowledge, the reports and data provided to t	nsibilities include ensurir		
Name of Authorized Agent:	Todd Slamowitz	2077 20 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		
Name of Reporting Carrier:	Carolina West Wireless, Inc.			
Signature of Authorized Officer or Emp	oyee: CERTIFIED ONLINE		Section VIII	Date: 07/16/2014
Printed name of Authorized Officer or I	mployee: Lisa Mabe	THE STATE OF THE S		- 5118H - 7 - Fr - 15
Title or position of Authorized Officer o	r Employee: Staff Accountant			
Telephone number of Authorized Office	er or Employee: 3369735000 ext.1003			
Study Area Code of Reporting Carrier:	238046 Filing	Due Date for this form:	07/31/2014	
	ements on this form can be punished by fine or forfeiture under Title 18 of the United S	under the Communications A		(b), or fine or imprisonment

	ed to File Compliance with 47 CFR §54.1009(a)	(-) on benefit of neporang corner
I, as agent for the reporting carrier, certify that I am author	ized to submit the certification on behalf of the reporti	ng carrier; I have provided the data reported herein based or
data provided by the reporting carrier; and, to the best of n	ny knowledge, the information reported herein is accur	rate.
Name of Reporting Carrier:	Carolina West Wireless, Inc.	1.00.0
Name of Authorized Agent or Employee of Agent:	Todd Slamowitz	
Signature of Authorized Agent or Employee of Agent:	CERTIFIED ONLINE	Date: 07/16/2014
Printed name of Authorized Agent or Employee of Agent:	Todd Slamowitz	950 91
Title or position of Authorized Agent or Employee of Agent	FCC Legal Counsel	
Telephone number of Authorized Agent or Employee of Age	nt: 7035848678 ext.	
Study Area Code of Reporting Carrier: 238046	Filing Due Date for this form:	07/31/2014

5020000000					
(080) Triba	al Lands Reporting				FCC Form 690
34					Approved by OMB OMB Control No. 3060-1185
64 15, 11, 185					Page 5 of 8
				2.00	
<010>	Study Area Code		238046		
<015>	Study Area Name		Carolina West	t Wireless, Inc.	
<020>	Program Year Contact Name - Person USAC should contact regarding to	nic data	2014	0.75	
<035>	Contact Name - Person OSAC should contact regarding to		Todd Slamowit 30> 7035848678 ex	244	
<039>	Contact Email Address - Email Address of person identifi				*
			COACHION ACCOUNT	2014410011	
<142>	State		11-13		
<143>	County				
\143 >	County				*
LEDAUCKWOODS					
<144>	Tribal Land(s) on which ETC Serves				
					1
<145>	Tribal Government Engagement Obligation				
		Name of Attached	Document (.pdf)		
	If your company serves Tribal lands, please select (Yes,N each of these boxes to confirm the status described on t				
	PDF, on line 145, demonstrates coordination with the Ti				
	government pursuant to § 54.1004 includes:				
			Select		
445			(Yes,No, NA)		
<146>	Needs assessment and deployment planning with a focu	us on Tribal			
0,640	community anchor institutions;				
<147>	Feasibility and sustainability planning;				
<148>	Marketing services in a culturally sensitive manner;		<u> </u>		
<149>	Compliance with Rights of way processes				
<150>	Compliance with Land Use permitting requirements		1		
<151>	Compliance with Facilities Siting rules				
<152>	Compliance with Environmental Review processes				
<153>	Compliance with Cultural Preservation review processes				
-100-	Sometime with contain reservation review processes				

<154> Compliance with Tribal Business and Licensing requirements.

(090) Projec	t Update Information	FCC Form 690 Approved by OMB
		OMB Control No. 3060-1185
		Page 5 of 8
<010>	Study Area Code	238046
<015>	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com
<200>	Date Authorized to Receive Support	07/18/2013
<201>	Targeted Completion Date	02/05/2016
<202>	Total Mobility Fund Support Awarded	1400.0
<203>	Total Mobility Fund Support Disbursed	466.67
<204>	Support Applied to Network Design	7974.79
<205>	Support Applied to Construction	512.69
<206>	Support Applied to Deployment	
<207>	Support Applied to Maintenance	
<208>	Certify Network will Support 3G Mobile Service (Yes / No)	0 0
<209>	Certify Network will Support 4G Mobile Service (Yes / No)	O
<210>	Actual Completion Date	
<211>	Project Status Description (attached)	CWW_PSD_NC.pdf
		{Name of PDF attached}
86	Please check these boxes below to confirm that the attached PDF, on line 211, contains a project status pursuant to §54.1005(b)(2)(v). The information	

(101) Certification - Reporting Carrier	FCC Form 690
	Approved by OMB
	OMB Control No. 3060-1185
	Page 7 of 8

<010>	Study Area Code	238046
<015>	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for Mobility Fund recipients; and, to the pest of my knowledge, the information reported on this form and in any attachments is accurate.		
Name of Reporting Carrier:		
Signature of Authorized Officer:	Date	
Printed name of Authorized Officer:		
Title or position of Authorized Officer:		
Telephone number of Authorized Officer:		
Study Area Code of Reporting Carrier:	Filing Due Date for this form:	

(102) Certification - Agent / Carrier	FCC Form 690	
	Approved by OMB	
	OMB Control No. 3060-1185 Page 8 of 8	

<010>	Study Area Code	238046
<015>	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

Certification of Officer to Authorize an Agent to File Annual Reports for Mobility Fund Recipients on Behalf of Reporting Carrier I certify that (Name of Agent) Todd Slamowitz is authorized to submit the information reported on behalf of the reporting carrier also certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized is authorized to submit the information reported on behalf of the reporting carrier. I agent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate. Name of Authorized Agent: Todd Slamowitz Name of Reporting Carrier: Carolina West Wireless, Inc. CERTIFIED ONLINE Signature of Authorized Officer: Date: 07/16/2014 Printed name of Authorized Officer: Lisa Mabe Title or position of Authorized Officer: Staff Accountant Telephone number of Authorized Officer: 3369735000 ext.1003 Study Area Code of Reporting Carrier: 238046 Filing Due Date for this form: 07/31/2014 Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

Certification of Agent Authorized to File Annual Reports for Mobility Fund Recipients on Behalf of Reporting Carrier I, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for Mobility Fund recipients on behalf of the reporting carrier; I have provided the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reported herein is accurate.				
Name of Authorized Agent or Employee of Agent: Todd Slamow	itz	V-31=400-		
Signature of Authorized Agent or Employee of Agent: CERTIFIED ONLINE		Date: 07/16/2014		
Printed name of Authorized Agent or Employee of Agent: Todd S	lamowitz			
FCC Le	gal Counsel			
Telephone number of Authorized Agent or Employee of Agent: 7035	5848678 ext.	W 10 27		
Study Area Code of Reporting Carrier: 238046	Filing Due Date for this form:	07/31/2014		

Attachments

. . .

(060) Coverage and Performance Report	FCC Form 690
	Approved by OMB
	OMB Control No. 3060-1185

<010>	Study Area Code	238046
<015>	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com
<140>	Coverage and Performance Report Year	01/2013 - 12/2013

বর্ষা বর্ষ্ট বর্ষ্ট বর্ষ্ট বর্ষ্টা বর্ষ্টা বর্ষ্ট বর্ষ্ট বর্ষ্ট বর্ষ্ট বর্ষ্ট বর্ষ্ট বর্ষ্ট বর্ষ্ট বর্ষ্ট <141> Certify that Certify that Certify that Resident **Total Resident Road Miles Total Road** Electronic **Drive Test** Scattered Site Resident Population Population Road Miles per Census Miles Shapefiles are Results are Tests are uploaded (yes/no) uploaded Population per **Newly Reached** Reached by per Census **Block Newly** covered per uploaded State County Census Block Census Block by Service Service Block Reached Census Block (yes/no) (yes/no) Wilkes 0000 0 0 NC 0 0.0 0.0 0.0 Yes

> Percentage of Total Population Reached by Service

. . .

0

Percentage of Total Road Miles covered by Service 0

Caroline West Wireless, Inc.

. . . .

Project Status Description

Pursuant to Section 54.1009(a)(6) of the Commission's rules, ¹ Carolina West Wireless, Inc. ("Filer") submits that there is no material updates to its project description, included the projected budget, associated with this Study Area Code that was provided by Filer in its FCC Form 680 filed in conjunction with its Auction 901 winning bids.

In its FCC Form 680, Filer explained that in order to provide the most advanced wireless broadband service available to date, Filer is using the proceeds from auction 901 to expand its footprint with new cell sites, and supplementing its existing network footprint with 4G service. Specifically, utilizing the 1900 MHz, 1700/2100 MHz spectrum bands, along with the 700 MHz spectrum band, Filer intends to provide high speed, broadband data services over 4G. Further, installation of new cell sites and the overlay of 4G will enable Filer to meet its public interest obligations to provide rural North Carolina citizens with access to advanced telecommunications and information technologies that are reasonably comparable to those available in urban areas.

As of this date Filer had completed its network design, and has commenced construction of its network. Filer anticipates that it will compete construction and deploy the network in the areas associated with this study code by no later than the construction deadline of July 19, 2016.

Section 54.1009(a)(6) provides that a winning bidder shall include "Updates to the information provided in § 54.1005(b)(2)(v).

FCC Form 690 - Construction Status

Carolina West Wireless, Inc. has not yet completed construction with respect to the SAC associated with this filing.